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Substitute for form 1449/PTO				<b>Complete if Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(Use as many sheets as necessary)</i>				Application Number	10/626,187
Sheet	1	of	1	Filing Date	July 24, 2003
				First Named Inventor	John Davies
				Art Unit	3771
				Examiner Name	T. K Mitchell
				Attorney Docket Number	779-X03-002

<b>NON PATENT LITERATURE DOCUMENTS</b>				
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.		T <sup>2</sup>
/KM/	AA	"New Eagle Communications" product catalog, Silver Lake, KS, USA, 1993		
/KM/	AB	"New Eagle Communications" design drawing, Gas Mask Adapter, Scott AV2000, New Stawn, KS, USA 1999		
/KM/	AC	"New Eagle Communications" design drawings, Gas Mask Adapter Assembly (Avon, M17, M40, Scott 65), Adapter Mic (NCW, NNC, NC), 1995		

Examiner Signature	/Kristen Matter/	Date Considered	06/24/2008
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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